# Work Order Bid (ID)

#### **WORK ORDER INFORMATION**

Work Order Name: 13013sh3456 Work Order Type: Weatherization Audit Name: 13013SH3456

#### **CLIENT INFORMATION**

Client ID: 13013sh3456

#### <u>AGENCY INFORMATION</u>

Client ID: 13013sh3456

Agency: Shelby County Community Services Agency **Agency Phone:** (901) 222-4280 Address: 3772 South Hickory Ridge Mall, Suite 516 Fax: (901) 222-4313

> Memphis, TN 38115 **Email Address:**

Agency Contact: WOOD, JIM Work Phone: Cell Phone:

**Email Address:** 

Company Name & License Number:	
Contractor's Signature:	

### **COMMENT**

**DOE** Weatherization Assistant Version 8.6.0 Page 1 of 5

## Measures

IV	leasure 1 Infilt	ration Redctn			Componen	ts			Inspected
Comment BLOWER DOOR MEASUREMENTS ARE FOR FRT DOOR  B/S A/C WD#5  18,000 BTU  CAULK WD #4  SEAL PLUMBING PENETRATIONS KITCHEN AND BATH SINK  CAULK WD #3  B/S A/C WD #3  SEAL A/C HOLE OUTSIDE (26X20)									
					Estimated	1		Actual	
# /	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Miscellaneous Su	Infiltration Reduction	Each	1					
2	Labor	Infiltration Reduction	Each	1					
Ot	her Detail								
	Measure Sub Total: Sub Total						Sub Total:		
F	Field Notes:								

#### Inspected Measure 2 User-Spec Ceiling R **Components** A1 **Comment INSTALL R19 ATTIC INSULATION** \* CONTRACTOR SHOULD CHECK CEILINGS FOR SOUNDNESS BEFORE INSTALLING INSULATION. **Estimated** Actual # Material / Labor **Description / Comment** Units **Unit Cost** Total Qty **Unit Cost** Total Qty Insulation Attic Insulation - Blown SqFt 874 Cellulose - R-19 2 Labor Attic Insulation - Blown SqFt 874 Cellulose - R-19 Other Detail Measure Sub Total: Sub Total: Field Notes: Inspected Components E1,N1,S1,W1 **Measure 3** Wall Insulation **Comment ADD R-13 WALL INSULATION** Actual **Estimated** # Material / Labor **Description / Comment Units Unit Cost** Total **Unit Cost Total** Qty Qty SqFt 820 Insulation Wall Insulation - Blown Cellulose - 2x4 Filled Wall Insulation - Blown 820 2 Labor SqFt Cellulose - 2x4 Filled Other Detail Sub Total: Measure Sub Total: Field Notes:

Measure 4 Refr	igerator Rplcmnt			Componen	ts			Inspected
Comment REPLAC	CE 18 CU FT REFRIGER	RATOR						
			Estimated			Actual		
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1 Refrigerators	REFRIGERATOR REPLACEMENT	Each	1					
2 Labor	REFRIGERATOR REPLACEMENT	Each	1					
Other Detail						_		
			Measur	e Sub Total:		,	Sub Total:	
Measure 5 CO I	Monitor is Needed			Componen	ts			Inspected
				Estimated		Actual		
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1 Health and Safety	CO monitor	Each	2					
2 Labor	CO monitor	Each	2					
Other Detail								
			Measure Sub Total: Sub Total:					
Field Notes:								

Measure 6 Fix Improper Venting (Clothes Dr			hes Dryer)	)		Inspected			
C	comment REPLAC	E DRYER VENT							
				Estimated			Actual		
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety	Equipment	Each	1					
2	Labor	Equipment	Each	1					
C	Other Detail						1		
L									
	Measure Sub Total: Sub Total:								
	Field Notes:								
L									
		Work Order Grand Total: Grand Total:							

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